

EXHIBIT A

COMPLAINT

Electronically Filed
5/5/2020 9:42 AM
Steven D. Grierson
CLERK OF THE COURT

Steven D. Grierson

1 This matter Covind V. SPIRIT Airlines is brought
2 because AIRLINES in Direct violation of AMERICAN
3 WITH Disabilities Act denied Passenger to board her
4 flight. The MORE ANXIOUS Passenger GOT THE MORE
5 malicious AND DIRECTLY ABUSING Thier Authority to
6 upset passenger TO THE POINT OF SHAKING AND TEARS.
7 Passenger Covind Has A RARE (EXTREMELY RARE)
8 BLOOD DISORDER CALLED PORPHYRIA CAUSING AN INTERNAL
9 NEUROLOGICAL ANXIETY. WHEN FLYING THIS REQUIRES Plaintiff
10 Covind TO TAKE PRESCRIBED MEDICINE. EXPLAINED TO
11 THE "UNTRAINED- UNKNOWLEDGABLE- malicious- VINDICTIVE
12 ABUSIVE " STAFF OF SPIRIT AIRLINES Thier RESPONSE
13 WAS Plaintiff Could NOT FLY BUT WOULD BE ALLOWED TO FLY
14 THE NEXT NIGHT SAME FLIGHT SAME SEAT. THIS IS NOT
15 THE FIRST TIME SPIRITS UNTRAINED STAFF HAS DONE THIS
16 TO PLAINTIFF COVIND. ON A PRIOR OCCASION UNTRAINED AND
17 DEFINITELY UNKNOWLEDGABLE STAFF OF SPIRIT AIRLINES
18 actually boarded PLANE That Plaintiff was 'already' ON AS
19 Plaintiff WAS ASLEEP FROM MEDICATION PROCEEDED TO WAKE
20 UP Plaintiff MADE HER Deboard (much to the Dismay) (OF
21 CLOSE BY Passengers who were voicing Thier OBJECTIONS)
22 Plaintiff Covind mortified and CONFUSED STARTING TO
23 SHAKE and Sob at this clear malicious ABUSE OF POWER
24 WAS MADE TO TAKE SAME FLIGHT FOLLOWING NIGHT. ON THE
25 SAME medication FOLLOWING NIGHT WAS NOT APPROACHED

1 AND FLEW WITHOUT INCIDENT. ON NOT ONE - NOT TWO -
 2 NOT THREE - BUT ON 4 OTHER OCCASIONS UNTRAINED
 3 MALICIOUS - ABUSIVE AND CERTAINLY ABUSING THEIR
 4 AUTHORITY TO THE SAME SCENERIO - SAME OUTCOME AND
 5 UTTER UNLAWFUL DISCRIMINATION AGAINST THE PLAINTIFF.
 6 THIS BEHAVIOR ONLY EVER ASSERTED BY THE UNTRAINED
 7 STAFF OF SPIRIT HAS CAUSED PLAINTIFF SEVERE MENTAL
 8 EMOTIONAL PHYSICAL REPEATED COMPENSATORY UNDUE
 9 SUFFERING BY THEIR UNLAWFUL DISCRIMINATION.

11 PLAINTIFF COVINO ON DECEMBER 23, 2019 WAS AGAIN
 12 DENIED BEING ABLE TO BOARD FOR NO REASON. PLAINTIFF
 13 COVINO WAS NOT LOUD - TROUBLESOME OR OUT OF LINE IN
 14 ANY WAY SHAPE OR FORM. PLAINTIFF COVINO THEN PROCEEDED
 15 TO AMERICAN AIRLINES PURCHASED A TICKET TO BOSTON
 16 MASS. LEAVING ABOUT A 45 MINUTE DIFFERENCE
 17 THAN SPIRITS FLIGHT THAT PLAINTIFF WAS DENIED ABILITY
 18 TO BOARD. 'SEE EXHIBIT - A'. NEVER ANYWHERE ELSE
 19 IS PLAINTIFF COVINO - DENIED - QUESTIONED OR EVEN
 20 GIVEN A SECOND LOOK ~~AT~~ DUE TO ANTI-ANXIETY MEDICATION.
 21 THE MALICIOUS ABUSE OF POWER BY A FEW UNTRAINED
 22 UNEDUCATED SPIRIT AIRLINES EMPLOYEES WHO THINK IT
 23 IS AMUSING AND KEEP BREAKING THE AMERICANS WITH
 24 DISABILITIES ACT - SHALL NOW BE HELD TO ANSWER

1 IN 'Williams V. EXPRESS AIRLINES I, INC., 825 F.
 2 Supp. 831 A.D.D. 972 (WD. TENN. 1993) The Court held
 3 whether the airline had just cause to deny Plaintiff the
 4 RIGHT TO BOARD was dependent on a trial issue. Whether it
 5 had valid safety reasons or whether it unlawfully discriminated
 6 against the Plaintiff. Court said compensatory damages are
 7 available to a private litigation.' IN 'Shinault V. American Airlines
 8 INC. 936 F.2d 796 (5th Cir. 1991) Emotional Distress Damages
 9 are recoverable for handicap discrimination claims under
 10 A.C.A.A. (49 U.S.C.A. § 41705) Since the Air Carrier Access Act
 11 does NOT provide a remedial scheme, evidence of a Congressional
 12 intent to exclude emotional distress damages does NOT
 13 exist. The A.C.A.A. (49 U.S.C.A. § 41705) provides a private
 14 cause of action for handicap discrimination declared in
 15 'Bowler V. Federal exp. Corp. 156 F. Supp 2d 678 (WD Tenn. 2001)
 16 Court held same The A.C. A.A. 'impliedly provides a private
 17 cause of action for handicap discrimination claims 'Tallerico
 18 V. Trans World Airlines Inc. 881 F. 2d 566 28 FED. R. Evid. Ser.
 19 337 108 A.L.R. Fed 551 (8th Cir. 1989) - To allow a private
 20 cause of action is consistent with underlying purpose of ACAA
 21 The area of discrimination against handicap persons by Air Carriers
 22 allows for Private RIGHT OF ACTION UNDER THE TEST
 23
 24
 25
 26
 27
 28

1 enunciated by Supreme Court in Cort v. Ash 422 U.S. 66,
 2 955, CT. 2080, 45 L. ED. 2d 26 (1975) The AIR CARRIER
 3 ACCESS ACT which Prohibits air carriers from "Discriminating"
 4 against disabled individuals. SPIRIT AIRLINES here has
 5 Violated the Americans with Disabilities ACT - NOT
 6 only being Cognizant of Plaintiff Covinos disability
 7 acted Malicious with Intentional Infliction of
 8 Emotional Distress by using CRUEL and UNJUST
 9 CONTROL - Causing Plaintiff to suffer prolonged
 10 mental pressure and Distress. In closing

11 The Court must accept a well Pleaded case with
 12 Factual allegations supported by evidence.
 13

14 SEE EXIBITS A - B - C and D

15 2 TWO OF The EXIBITS BEING SWORN Affidvits
 16 by Family members that will speak to
 17 The Problems Plaintiff having to Deal with and
 18 suffer through when Flying SPIRIT Airlines
 19 They are Responsible for Emotional-mental and
 20 The Fear of being denied to BOARD FLIGHT which equals
 21 a LARGE Reason compensatory Damages should be available
 22
 23
 24
 25
 26
 27
 28

1 Plaintiff's injuries, EMOTIONAL, MENTAL,
2 and physical can NOT BEGIN TO BE CALCULATED.
3

4 THIS HAS OCCURED ON SEVERAL OCCASIONS
5 CAUSING Plaintiff REPEATED EMOTIONAL, MENTAL,
6 PHYSICAL, PAIN AND SUFFERING. HARASSING AND
7 EMBARRASSING Plaintiff REPEATEDLY.
8
9

10 PRAYER FOR RELIEF wherefore

- 11 1. THE COURT TAKE INTO CONSIDERATION
- 12 COMPENSATORY DAMAGES AND MEDICAL COSTS,
- 13 FOR PAST, PRESENT, AND FUTURE EVENTS
- 14
- 15 2. FOR GENERAL DAMAGES PAST, PRESENT, AND FUTURE
- 16 PAIN AND SUFFERING AND OTHER DAMAGES
- 17
- 18 3. FOR INTEREST AT THE STATUTORY RATE; AND
- 19
- 20 4. FOR SUCH OTHER AND FURTHER RELIEF AS THE COURT
- 21 deems JUST AND EQUITABLE.
- 22
23

24 I declare UNDER PENALTY OF PERJURY UNDER THE
25 LAW OF THE STATE OF NEVADA THAT THE FOREGOING IS TRUE
26 AND CORRECT.
27

28 DATED 14th Day of APRIL, 2020

5



ROBYN COVINO
6955 N. DARANGO STE 1115-145
LAS VEGAS, NV 89149
702-750-5019 - Plaintiff Pro PR

EXHIBIT A

all ORIGINALS will be
Produced at trial

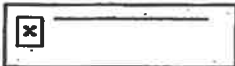
----- Forwarded message -----

From: Spirit Airlines <booking@fly.spirit-airlines.com>

Date: Wed, Nov 27, 2019, 6:15 PM

Subject: Spirit Airlines Flight Confirmation: CI52SK

To: <robynrrants1@gmail.com>



Thank you for choosing Spirit Airlines. This notice contains information to be used during your travels. Please review the contents of this document carefully. For your convenience, please print a copy to take with you on your trip.

Please do not reply to this email. The reply email address is used solely for outgoing email documents.

YOUR CONFIRMATION CODE**CI52SK****BOOKING DATE** Wednesday, November 27, 2019**Flight****MONDAY, DECEMBER 23, 2019**

Las Vegas, NV

Boston, MA

FLIGHT

640

TIME

9:50 PM

5:39 AM+

DURATION

04 h 49 min

TERMINAL

1

WEDNESDAY, JANUARY 01, 2020

Boston, MA

Las Vegas, NV

FLIGHT**TIME**

4:46 PM

8:05 PM

DURATION

06 h 19 min

TERMINAL

EXHIBIT B

Agent: 92042
Issue Date: 23Dec19 09:30PM

Summary Receipt
Owning Carrier: NK
COVINO/ROBYN

CI52SK BOOKING

Charges

Fares	98.60 USD
Travel Fees	112.58 USD
Taxes	9.64 USD
Fees	0.00 USD
Other	-8.24 USD
TOTAL	212.58 USD

Payments

26Nov19 VI	212.58 USD
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NK 640 R 24Dec19 LASBOS 09:50PM-05:39AM
NK 641 U 01Jan20 BOSLAS 04:46PM-08:05PM

42144972

5078

PAYMENT 212.58 USD
BALANCE 0.00 USD
Page 1 of 1

10 PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

ISSUED BY AMERICAN AIRLINES

NAME OF PASSENGER (NOT TRANSFERABLE)
XO FROM COVINO/ROBYN GRACE
XO TO LAS VEGAS
PHILADELPHIA

ISS. AGENT ID. 23DEC19
FARE BASIS NFI / LAS
FLIGHT AA 589
CLASS L
DATE 23DEC
TIME 10P

GROUP 8
SEAT 8F

BOARDING PASS
DOORS CLOSE 10 MIN PRIOR TO DEPARTURE

00127455587025

1 001 2395342584 5

AMERICAN AIRLINES
BOARDING PASS
COVINO/ROBYN GRACE
K189T92
LAS VEGAS
PHILADELPHIA
AMERICAN AIRLINES
23DEC19 L 23DEC1040P
1005P
8F
GROUP 8

10 PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

ISSUED BY AMERICAN AIRLINES

NAME OF PASSENGER (NOT TRANSFERABLE)
XO FROM COVINO/ROBYN GRACE
XO TO PHILADELPHIA
BOSTON

ISS. AGENT ID. 24DEC19
FARE BASIS TED / PHL
FLIGHT AA 1560
CLASS L
DATE 24DEC
TIME 845A

GROUP 8
SEAT 6F

BOARDING PASS
DOORS CLOSE 10 MIN PRIOR TO DEPARTURE

00127473289152

2 001 2395342584 1

AMERICAN AIRLINES
BOARDING PASS
COVINO/ROBYN GRACE
K189T92
PHILADELPHIA
BOSTON
AMERICAN AIRLINES
24DEC19 L 24DEC845A
810A
6F
GROUP 8

EXHIBIT C

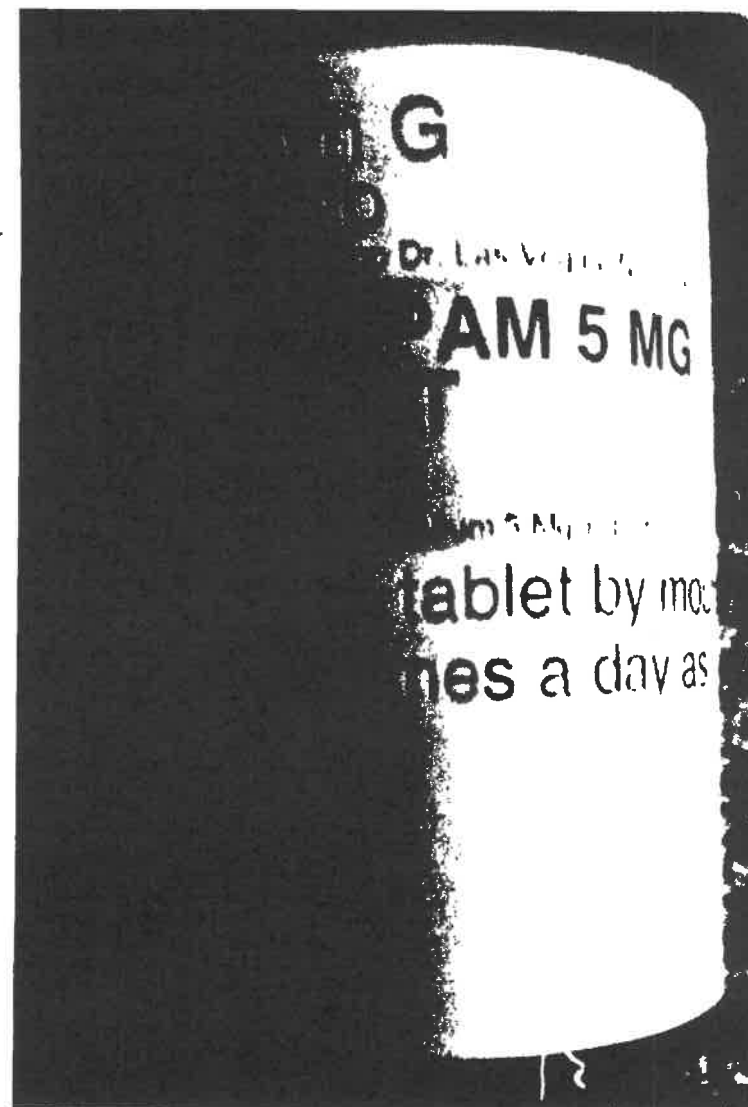


EXHIBIT D



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Clinical manifestations and diagnosis of acute intermittent porphyria

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Disclosures

All topics are updated as new evidence becomes available and our peer review process is complete. Literature review current through: Feb 2012. [This topic last updated: Feb 11, 2010.]

INTRODUCTION — Acute intermittent porphyria (AIP, Swedish porphyria, pyrroloporphyria, intermittent acute porphyria) is an autosomal dominant disorder resulting from a partial deficiency of porphobilinogen deaminase (PBGD, hydroxymethylbilane synthase, previously called uroporphyrinogen I synthase), the third enzyme in the heme biosynthetic pathway (figure 1 and figure 2). Symptoms in AIP are due to effects on the visceral, peripheral, autonomic, and central nervous systems. They usually occur as intermittent attacks that are sometimes life-threatening [1,2].

The clinical manifestations and diagnosis of AIP will be reviewed here. The etiology, pathogenesis, and management of AIP and an overview of the porphyrias are discussed separately. (See "Etiology and pathogenesis of acute intermittent porphyria" and "Management of acute intermittent porphyria" and "Porphyrias: An overview".)

CLINICAL MANIFESTATIONS — Most individuals with acute intermittent porphyria (AIP, ie, those who inherit a porphobilinogen deaminase mutation) never develop symptoms. Accordingly, symptomatic disease may skip generations or be recognized in only one individual within a family. The presentation is highly variable and the symptoms nonspecific, which accounts in part for delays in diagnosis. Symptoms usually occur as acute attacks, most often in the third or fourth decades of life, and are more common in women than in men. The most common manifestations of AIP are listed in the table (table 1).

Attacks in AIP develop over hours or days and persist for days or weeks, depending upon precipitating factors and treatment. There are no cutaneous manifestations. Rare exceptions are patients with AIP and advanced renal failure, who may develop elevations in plasma porphyrins and blistering skin lesions [2,3].

Abdominal and urinary symptoms — Abdominal pain is the most common symptom in AIP, occurring in 85 to 95 percent of patients with acute attacks (table 1). It is usually severe, steady, and poorly localized but is sometimes cramping, and is often accompanied by constipation and signs of ileus such as nausea, vomiting, abdominal distension, and decreased bowel sounds. However, diarrhea and increased bowel sounds are sometimes seen.

Because the pain and other symptoms are neuropathic rather than inflammatory, abdominal tenderness, rebound, fever, and leukocytosis are usually minimal or absent during an acute attack. Bladder dysfunction may cause urinary retention, incontinence, and dysuria. Dark or reddish urine is often an early symptom (picture 1) [1,2,4-6]. (See "Etiology and pathogenesis of acute intermittent porphyria", section on 'Metabolic defect'.)

Peripheral neuropathy — Sensory neuropathy is common and presents with pain in the back, chest, and extremities, and may precede the abdominal pain. Patchy numbness, paresthesias, and dysesthesias

Clinical manifestations and diagnosis of acute intermittent porphyria

Page 2 of 14

may occur. A peripheral motor neuropathy develops early in some attacks, but is more often a later manifestation of a prolonged attack.

Motor weakness usually begins proximally in the upper extremities and may progress distally and to the lower extremities. Especially with prolonged attacks, it may also involve cranial nerves and lead to bulbar paralysis, respiratory impairment, and death. Although advanced motor neuropathy with quadriplegia and respiratory paralysis is potentially reversible with appropriate treatment (eg, intravenous hemin), some permanent paralysis may remain [7,8].

Systemic and central nervous system involvement — The autonomic nervous system is affected in AIP and circulating catecholamine levels are increased [9]. Tachycardia is the most common physical sign, occurring in approximately 80 percent of attacks, and is often accompanied by hypertension, sweating, restlessness, and tremor. Insomnia is often an early symptom of an attack.

Other neuropsychiatric manifestations include anxiety, restlessness, agitation, hallucinations, hysteria, disorientation, delirium, apathy, depression, phobias, and altered consciousness, ranging from somnolence to coma. Cerebral manifestations may be accompanied by MRI changes that suggest vasospasm [10]. Seizures may be due to hyponatremia or represent a neurological manifestation of porphyria. Long-term psychiatric symptoms such as depression occurring apart from acute attacks may be seen but are more difficult to attribute to porphyria [2].

Electrolyte and metabolic abnormalities — Hyponatremia during an acute attack may be due to hypothalamic involvement and the syndrome of inappropriate antidiuretic hormone secretion (SIADH), but other mechanisms, such as gastrointestinal or renal sodium loss are sometimes important [5]. Other electrolyte abnormalities may include hypomagnesemia and hypercalcemia [2]. (See "Pathophysiology and etiology of the syndrome of inappropriate antidiuretic hormone secretion (SIADH)".)

Long term effects — Symptoms of the acute porphyrias usually occur as acute attacks, with interval resolution. However, some patients develop chronic pain and other long-term symptoms including depression and anxiety, especially after multiple recurrent attacks. These patients are at increased risk for suicide and require adequate pain management and psychiatric monitoring [2,11].

Persistent elevations in serum transaminases are common, especially in patients who have had repeated disease exacerbations [12,13]. It is not clear if there is a risk for developing cirrhosis. However, there is clearly a substantially increased risk of hepatocellular carcinoma, especially after age 50 [14-22].

Persistent hypertension and the development of chronic renal disease are increasingly recognized in patients with AIP [13,23,24]. Renal histology may reveal interstitial disease rather than findings attributable to hypertension [25]. A number of patients have required dialysis or renal transplantation, which are generally well tolerated [26].

AIP in children — In a Swedish registry of 464 DNA-confirmed cases of AIP, 78 were under 18 years of age; 61 of the 78 were followed for approximately 2.5 years, during which time symptoms developed in 6 (10 percent) [27]. In all six cases, the first attack occurred before the age of 15 years; symptoms were generally vague and of short duration and none of the attacks was accompanied by paresis or other severe symptoms. Urinary levels of ALA and PBG were often elevated only slightly, or not at all both at baseline and during the acute attacks.

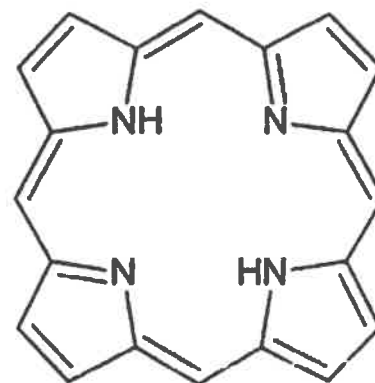
The authors recommended that children of AIP gene carriers be DNA tested and carefully counseled on preventive measures to avoid developing manifest AIP.

DIAGNOSIS — An accurate diagnosis of acute porphyria is important in order to institute appropriate therapy and avoid progressive neurological impairment. Because the presenting symptoms and signs are

Porphyrin

From Wikipedia, the free encyclopedia

Porphyrins are a group of organic compounds, many naturally occurring. One of the best-known porphyrins is heme, the pigment in red blood cells; heme is a cofactor of the protein hemoglobin. Porphyrins are heterocyclic macrocycles composed of four modified pyrrole subunits interconnected at their α carbon atoms via methine bridges (=CH-). Porphyrins are aromatic. That is, they obey Hückel's rule for aromaticity, possessing $4n+2$ π electrons ($n=4$ for the shortest cyclic path) delocalized over the macrocycle. Thus porphyrin macrocycles are highly conjugated systems. As a consequence, they typically have very intense absorption bands in the visible region and may be deeply colored; the name **porphyrin** comes from a Greek word for *purple*. The macrocycle has 26 pi electrons in total. The parent porphyrin is porphine, and substituted porphines are called porphyrins.



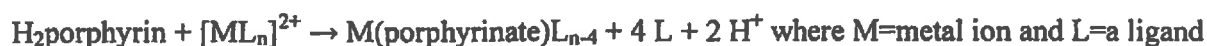
Structure of porphine, the simplest porphyrin

Contents

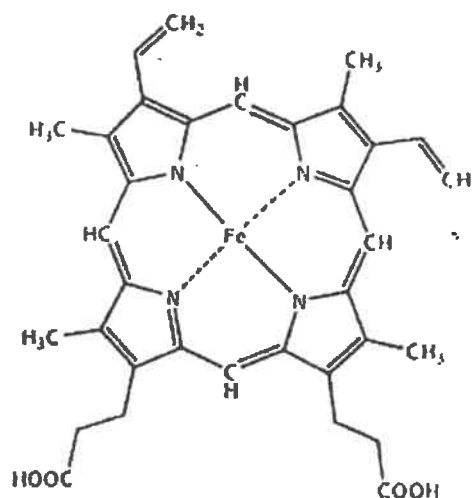
- 1 Complexes of porphyrins and related molecules
- 2 Synthesis
 - 2.1 Biosynthesis
 - 2.2 Laboratory synthesis
- 3 Applications
 - 3.1 Supramolecular chemistry
 - 3.2 Organic geochemistry
- 4 See also
- 5 Gallery
- 6 References
- 7 External links

Complexes of porphyrins and related molecules

Porphyrins are the conjugate acids of ligands that bind metals to form complexes. The metal ion usually has a charge of 2+ or 3+. A schematic equation for these syntheses is shown:



A porphyrin without a metal-ion in its cavity is a *free base*. Some iron-containing porphyrins are called hemes. Heme-containing proteins, or *hemoproteins*, are found extensively in nature. Hemoglobin and myoglobin are two O₂-binding proteins that contain iron porphyrins. Various cytochromes are also hemoproteins.



Heme B group of hemoglobin. An iron (Fe) atom in the middle is shown in red, complexed to four interior nitrogen atoms shown in blue.

EXHIBIT E

April 7, 2020

Elaine Covino
40 Avalon Street
Revere, MA 02151

To Whom it May Concern,

My daughter visited this past Christmas 2019, I was very concerned when she arrived at my house. Her behavior was not normal and it was concerning the entire family. She lost over 6 pounds over a small period of time, very nervous, emotional, lack of appetite and awake at all hours. I could hear her vomiting; dry heaving and I asked her constantly what was wrong. Her disorder was active and a phlebotomy was needed upon her return. Spirit Airlines had mistreated her to the point of activating her disorder.

Our usually pleasant Christmas was not pleasant due to sickness and worry. Even my son Richard said every time she flies with Spirit Airlines, she has a problem. Which on her paid return they gave her seat away, causing her even more anguish and nervous vomiting. I agree with my son, every time she uses Spirit there is problem, emotional, physical stress and emotional sickness.

I regret this letter has to be sent, but hopefully it will help future flyers that are discriminated against due to untrained employees.

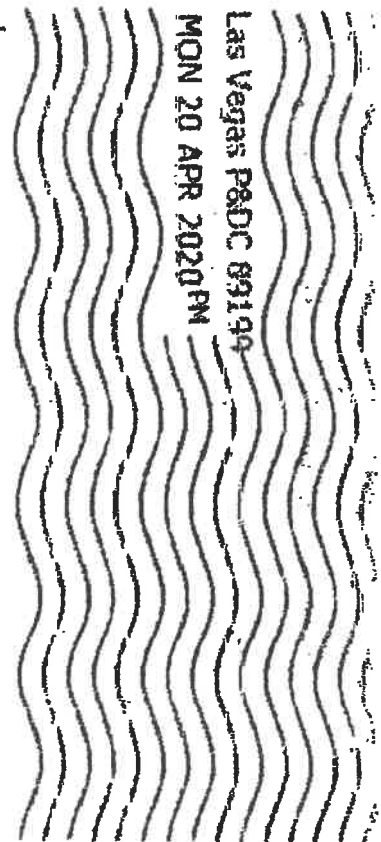
Elaine Covino

EXHIBIT F

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MON 20 APR 2020 PM

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